NORTH CAROLINA DEPARTMENT OF ENVIRONMENT & NATURAL RESOURCES **DIVISION OF WATER RESOURCES - AQUIFER PROTECTION SECTION**

APPLICATION FOR PERMIT TO CONSTRUCT A MONITORING OR RECOVERY WELL SYSTEM

PLEASE TYPE OR PRINT CLEARLY

In accordance with the provisions of Article 7, Chapter 87, General Statutes of North Carolina and regulations pursuant thereto, application is hereby made for a permit to construct monitoring or recovery wells.

1.	Date:	FOR OFFICE USE ONLY				
2.	County:	PERMIT NO.	ISSUED DATE			
3.	What type of well are you applying for? (monitoring or recovery):					
4.	Applicant:		Telephone:			
	Applicant's Mailing Address:					
	Applicant's Email Address (if available):					
5.	Contact Person (if different than Applicant):		Telephone:			
	Contact Person's Mailing Address:					
	Contact Person's Email Address (if available):					
6.	Property Owner (if different than Applicant):		Telephone:			
	Property Owner's Mailing Address:					
	Property Owner's Email Address (if available):					
7.	Property Physical Address (including zip code) and PIN Number					
8.	Reason for Well(s):(ex: non-discharge permit requirements, suspected contamination, assessment, groundwater contamination, remediation, etc.)					
9.	Type of facility or site for which the well(s) is(are) needed: (ex: non-discharge facility, waste disposal site, landfill, UST, etc.)					
10.	Are there any current water quality permits or incidents associated with this facility or site? If so, list permit and/or incident no(s).					
11.	Type of contaminants being monitored or recovered: (ex: organics, nutrients, heavy metals, etc.)					
12.	Are there any existing wells associated with the proposed well(s)? If yes, how many?					
	Existing Monitoring or Recovery Well Construction Permit No(s).:					
13.	Distance from proposed well(s) to nearest known waste or pollution source (in feet):					
14.	Are there any water supply wells located less than 500 feet from the proposed well(s)?					
	If yes, give distance(s):					
15.	Well Contractor:		Certification No.:			
	Well Contractor Address:					

PROPOSED WELL CONSTRUCTION INFORMATION

- As required by 15A NCAC 02C .0105(f)(7), attach a well construction diagram of each well showing the following: 1.
 - a. Borehole and well diameter
 - Estimated well depth b.
 - Screen intervals c.
 - Sand/gravel pack intervals d.

- Type of casing material and thickness e.
- f. Grout horizons
- Well head completion details g.

PROPOSED WELL CONSTRUCTION INFORMATION (Continued)

	PROPOSED	WELL CONSTRU	CHONIN	FORMATION (Continued)		
2.	Number of wells to be constructed	in unconsolidated	5.	How will the well(s) be secured?		
	material:					
3.	Number of wells to be constructed	in bedrock:	6.	Estimated beginning construction date:		
4.	Total Number of wells to be constru (add answers from 2 and 3)	ucted:	7.	Estimated construction completion date:		
	(and anomore from 2 and 6)					
		ADDITIONA	L INFORM	MATION		
1.	As required by 15A NCAC 02C .0105(f)(5), attach a scaled map of the site showing the locations of the following:					
	 a. All property boundaries, at least one of which is referenced to a minimum of two landmarks such as identified roads, intersections, streams, or lakes within 500 feet of the proposed well or well system. b. All existing wells, identified by type of use, within 500 feet of the proposed well or well system. c. The proposed well or well system. d. Any test borings within 500 feet of proposed well or well system. e. All sources of known or potential groundwater contamination (such as septic tank systems, pesticide, chemical or fuel storage areas, animal feedlots as defined in G.S. 143-215.10B(5), landfills, or other waste disposal areas) within 500 feet of the proposed well or well system. 					
		SIGN	NATURES			
			sponsibility fo	dards (Title 15A of the North Carolina Administrative Code, or compliance with these rules of Applicant or *Agent		
Printed name of Applicant or *Agent				* If signing as Agent, attach authorization agreement stating that you have the authority to act as the Agent.		
				,		
	ells as outlined in this Well Construction	on Permit application a	nd that it sha	owner hereby consents to allow the applicant to construct all be the responsibility of the applicant to ensure that the orth Carolina Administrative Code, Subchapter 2C).		
Signature of Property Owner (if different than Applicant)		Print	Printed name of Property Owner (if different than Applicant)			
		DIRI	ECTIONS			
Plea	se send the completed application to	the appropriate Division	n of Water R	esources's Aquifer Protection Section Regional Office:		
2090 Swai Phor	eville Regional Office OU.S. Highway 70 nnanoa, NC 28778 ne: (828) 296-4500 (828) 299-7043	Raleigh Regiona 3800 Barrett Driv Raleigh, NC 2760 Phone: (919) 79 Fax: (919) 571-4	re 09 1-4200	Wilmington Regional Office 127 Cardinal Drive Extension Wilmington, NC 28405 Phone: (910) 796-7215 Fax: (910) 350-2004		
225 (Faye	etteville Regional Office Green Street, Suite 714 etteville, NC 28301-5094	Washington Reg 943 Washington Washington, NC	Square Mall 27889			

Phone: (910) 433-3300 Fax: (910) 486-0707

Mooresville Regional Office

610 East Center Avenue Mooresville, NC 28115 Phone: (704) 663-1699 Fax: (704) 663-6040

Phone: (252) 946-6481 Fax: (252) 975-3716

Phone: (336) 771-5000 Fax: (336) 771-4630

